

Los Angeles Police Department
INVESTIGATIVE REPORT

UCR CODE

CC: _____

COMBINED EVID. REPORT
 MULTIPLE DRS ON THIS REPORT

Page _____ of _____ 03.01.00 (05/17)

CASE SCREENING FACTOR(S) <input type="checkbox"/> SUSPECT/VEHICLE NOT SEEN <input type="checkbox"/> PRINTS OR OTHER EVIDENCE NOT PRESENT <input type="checkbox"/> MO NOT DISTINCT <input type="checkbox"/> PROPERTY LOSS LESS THAN \$5,000 <input checked="" type="checkbox"/> NO SERIOUS INJURY TO VICTIM <input type="checkbox"/> ONLY ONE VICTIM INVOLVED		REPORT OF: BATTERY		INVEST. DIV. 10P	INC.# 180828005685	DR # _____					
		LAST NAME, FIRST, MIDDLE (OR NAME OF BUSINESS) PERELMAN, KEVIN		SEX M	DESC LV	HT 507	WT 185	AGE 46	DOB 02/19/72		
VICTIM ADDRESS R- 21620 BURBANK BLVD UNIT 15 ZIP 91307		PHONE _____		X <input type="checkbox"/>		B- _____		X <input type="checkbox"/>			
		E-MAIL ADDRESS _____		CELL PHONE 818-266-0115		DR. LIC. NO. (IF NONE, OTHER ID & NO.) A1787211		FOREIGN LANGUAGE SPOKEN _____		OCCUPATION _____	
		ENTRY 459/BFV POINT OF ENTRY POINT OF EXIT <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> FLOOR <input type="checkbox"/> OTHER		METHOD _____		LOCATION OF OCCURRENCE SAME AS V'S <input type="checkbox"/> RES. <input type="checkbox"/> BUS. <input type="checkbox"/> R.D. 89402 WILSON BLVD UNIT 15 91307 2158		PRINTS BY PREL. INV. ATTEMPT OBTAINED <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			
INSTRUMENT/TOOL USED _____		DATE & TIME OF OCCURRENCE 08/24/18 1830		DATE & TIME REPORTED TO PD 08/21/18 2019		TYPE PROPERTY STOLEN/LOST/DAMAGED <input type="checkbox"/> 03.04.00 GIVEN <input type="checkbox"/> STOLEN/LOST \$ _____		RECOVERED \$ _____ EST. DAMAGED ARSON / VAND. \$ _____			
VICT'S VEH. (IF INVOLVED) YEAR, MAKE, TYPE, COLOR, LIC. NO. _____		NOTIFICATION(S) (PERSON & DIVISION) _____		CONNECTED REPORT(S) (TYPE & DR #) _____							
MO IF <u>LONG FORM</u> , LIST UNIQUE ACTIONS. IF <u>SHORT FORM</u> , DESCRIBE SUSPECT'S ACTIONS IN BRIEF PHRASES, INCLUDING WEAPON USED. DO NOT REPEAT ABOVE INFO BUT CLARIFY REPORT AS NECESSARY. IF ANY OF THE MISSING ITEMS ARE POTENTIALLY IDENTIFIABLE, ITEMIZE AND DESCRIBE ALL ITEMS MISSING IN THIS INCIDENT IN THE NARRATIVE. SUSPECT GAVE SUSPECT A BUSINESS CARD SUDDENLY SUSPECT SLAPPED VICTIM ON RIGHT SIDE OF FACE. LEFT VISIBL REDNESS ON FACE. SUSPECT LEFT IN UNKNOWN DIRECTION											
TRANSIT-RELATED INCIDENT <input type="checkbox"/>		MANDATORY MARSY'S RIGHTS CARD PROVIDED TO THE VICTIM <input checked="" type="checkbox"/>		MOTIVATED BY HATRED/PREJUDICE <input type="checkbox"/>		DOMESTIC VIOLENCE <input type="checkbox"/>					
REPORTING EMPLOYEE(S) INITIALS, LAST NAME BOVIELLA SERIAL NO. 43395 DIV./DETAIL TOP		PERSON REPORTING SIGNATURE <i>[Signature]</i> OR RECEIVED BY PHONE <input type="checkbox"/>		NOTE: IF SHORT FORM AND VICTIM/PR ARE NOT THE SAME, ENTER PR INFORMATION IN INVOLVED PERSONS SECTION.							

THIS REPORT DOES NOT CONSTITUTE VALID IDENTIFICATION

KEEP THIS REPORT FOR REFERENCE. INSTRUCCIONES EN ESPANOL AL REVERSO.

Your case will be assigned to a detective for follow-up investigation based upon specific facts obtained during the initial investigation. Studies have shown that the presence of these facts can predict whether a detailed follow-up investigation would likely result in the arrest and prosecution of the suspect(s) or the recovery of property, in a manner that is cost-effective to you, the taxpayer. Significant decreases in personnel have made it impossible for detectives to personally discuss each and every case with all crime victims. A detective will not routinely contact you, unless the detective requires additional information.

TO REPORT ADDITIONAL INFORMATION: If you have specific facts to provide which might assist in the investigation of your case, please contact the detective Monday through Friday, between 8:00 A.M. and 9:30 A.M., or between 2:30 P.M. and 4:00 P.M. at telephone number _____. If the detective is not available when you call, please leave a message and include the telephone number where you can be reached.

COPY OF REPORT: If you wish to purchase a copy of the complete report, phone (213) 486-8130 to obtain the purchase price. Send a check or money order payable to the Los Angeles Police Department to Records and Identification Division, Box 30158, Los Angeles, CA 90030. Include a copy of this report or the following information with your request: 1) Name and address of victims; 2) Type of report and DR number (if listed above); 3) Date and location of occurrence. NOTE: Requests not accompanied by proper payment will not be processed.

DR NUMBER: If not entered on this form, the DR number may be obtained by writing to Records and Identification Division and giving the information needed to obtain a copy of the report (see above paragraph). Specify that you only want the DR number. It will be forwarded without delay. There is no charge for this service.

CREDIT CARDS/CHECKS: Immediately notify concerned credit corporation or banks to avoid possibility of being liable for someone else using your stolen or lost credit card or check.

HOW YOU CAN HELP THE INVESTIGATION OF YOUR CASE:

- * Keep this memo for reference.
- * If stolen items have serial numbers not available at time of report, attempt to locate them and phone them to the detective at the listed number.
- * If you discover additional losses, complete and mail in the Supplemental Property Loss form given to you by the reporting employee.
- * Promptly report recovery of property.
- * Promptly report additional information such as a neighbor informing you of suspicious activity at time crime occurred.

VICTIM-WITNESS ASSISTANCE PROGRAM: The Los Angeles City and County Victim-Witness Assistance Program (VWAP) can help to determine if you qualify for Victim of Violent Crime compensation. If you qualify, they will assist with filling your claim application. If you are a victim or a witness to a crime and will be going to court, they will explain the court procedures to you. Their staff may also assist you with other problems created by the crime.

To find the program location nearest to you, call the Victim-Witness Assistance Program at the Los Angeles City Attorney's Office (213) 485-6976, or the Los Angeles County District Attorney's Office (800) 380-3811.

VICTIMS OF VIOLENT CRIME COMPENSATION: Refer to paragraph at bottom of reverse side.